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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/039,232
Filing Date	December 31, 2001
First Named Inventor	Reeves
Group Art Unit	1732
Examiner Name	C. VIII C
Attorney Docket Number	11710-0320 (44040-723105)
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The reasons for this request are: Conflict of Interest						
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Address	Legal Department					
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Country	USA					
Telephone	920-721-2000	Fax				
☐ This request is made on behalf of myself and ☐ all the attorneys/agents of record, ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or ☐ the attorneys/agents associated with Customer Number ☐ This request is enclosed in triplicate (including any attachments).						
Name RobertyE. Richards – Reg. 10 /29,105						
Signature						
Date 6-30-03						
NOTE: Withdrawal is effective when approved rather than when received Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for						

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